



**COUNTY OF LOS ANGELES
ASSESSMENT APPEALS BOARD**

Kenneth Hanh Hall of Administration | 500 W Temple Street Room B4 | Los Angeles, California 90012
Phone: (213) 974-1462 | Fax: (213) 626-1741 | Email: TaxAgentRegistration@bos.lacounty.gov

Tax Agent Online Registration

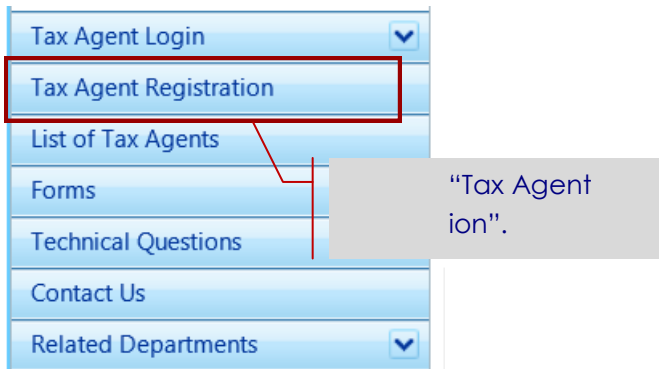
Quick Reference Guide

Effective July 1, 2013, all persons who are defined as a “Tax Agent” are required to register annually with the County of Los Angeles. This quick reference guide is designed to provide detailed instructions on how to register online as a Tax Agent. For more information on tax agent definition and on Tax Agent Registration Program, please visit the Assessment Appeals Board website.

This quick reference guide is designed to provide detailed instructions on how to register online as a Tax Agent.

Registering / Creating Login Account

- 1.) To begin registration, go to the Assessment Appeals Board website at: <https://lacaab.lacounty.gov/>.
- 2.) Located on the left navigation panel, click on “Tax Agent Registration”.



- 3.) On the verification page, enter the code from the image box in the text box provided, and then click on “Verify Code”. (**Note:** Characters are case-sensitive.)



QUICK TIP

If you are having trouble reading the code from the image box, click on the “Generate New Image” to get a new code.



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- Online registration form is displayed.
- Click on the radio button to select "User Type". Click on the drop down arrow to select "Agency/Firm Name".

User Type Information Click on radio button to select.

* User Type: Agent Attorney

* Select your Agency or Firm Name: ABC Tax Services, Inc. (if applicable)

Click [here](#) to review the current Agency/Firm list.
Click [here](#) for instructions to add an Agency or Firm.

Click on the drop down arrow to select desired agency or firm name.



QUICK TIP

If you wish to register without any affiliated agency, select "No Agency" under the "Agency/Firm Name".

If your agency or firm name is not listed, click on the link for more information on how to add an Agency or Firm.

- Enter the contact information where you would like to receive any correspondence or notices. (**Note:** All fields with an asterisk (*) are required.)

Contact Information:

* First Name: MI: * Last Name:

* Address 1: * Daytime Phone: Ext:

Suite/Unit/FL: Alternate Phone: Ext:

* City: Fax Number:

State:

* Zip Code:

- Enter your email address. Click on the drop down arrow to select your password reminder question and enter your answer on the text box provided. Then, click on "Continue". (**Note:** This will be used as your login information.)

Login Information:

* Login E-mail Address:

* Password Reminder Question:

* Password Reminder Answer:

Click on the drop down arrow to select desired password reminder question.

Clear All

Click on "Continue".



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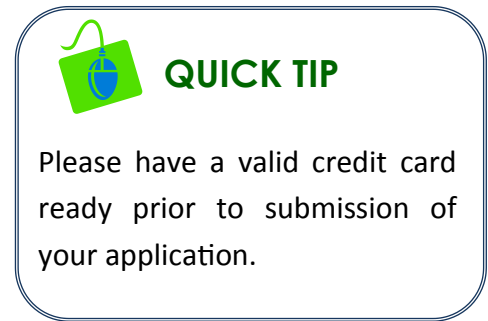
8.) Read and verify all entries, and then click on “Continue”.

Verification

Please verify that the information you entered is correct below:

Agency/Firm Name: Lee & Associates Property Tax Appeal
CA State Bar Number: 149545
Contact Name: John Doe
Business/Mailing Address: 500 W Temple Street Room B4 Los Angeles, CA 90012
Day Time Phone: (213) 974-5266
Alternate Phone:
Fax Number:
E-Mail Address: jdoe@test.lacounty.gov

Click on “Continue” after verification.



- 9.) The “Duties and Prohibitions” page will be displayed. Read the following statements. Click on the acknowledgement box, and then click on “Continue”.
- 10.) The “Member Account, Password and Security” page will be displayed. Read the following statements. Click on the acknowledgement box, and then click on “Acknowledge”.
- 11.) Your registration is almost complete. Read the following statements and click on “Continue”.
- 12.) The “Payment Verification” will be displayed with your information and payment amount for your review. Click on “Continue”. This will direct you to the payment information page to begin processing your payment.

Processing your Registration Fee

1.) On the “Payment Entry” page, enter your valid credit or debit card information, and then enter your billing information. Once completed, click on “Continue”.

Payment Entry

Payment Method: Credit or Debit Card

Card Information	Billing Information
Card Number: 4055011111111111	Name: John Doe
Expiration Date: December 2015	Address: 500 West Temple Street Room
Card Identification Code: ●●●	City: Los Angeles
	State: California
	Zip: 90010
	Phone: (213) 974-5466
	Email: jdoe_test@test.lacounty.gov

2.) Read the “Terms of Payment” and click on the acknowledgement box. Now, click on “Continue”.

3.) The payment confirmation page will be displayed. Review and verify the information and click on “Process Payment”.

4.) An online receipt will be displayed to confirm receipt of your registration fee. You

may print this page for your records and click on “Finish”. (**Note:** Once payment is processed, you will receive a payment confirmation email for this transaction, and another email with your login account information, including your user ID and password.)